FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400074643 (5)

CRAIG ELECTRIC, INC.

Principal Place of Business Mailing Address 1325-18TH AVENUE S.W. 1325-18TH AVENUE S.W. VERO BEACH FL 32962 VERO BEACH FL 32962							DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
2.	Suite, Apl. #, efc. 22 City & State			26	Suite, Apt. #, etc. 27 City & State				10/11/1994 4. FEI Number Applied For Not Applied by Not Applied For Not Applicable \$8.75 Additional	
22									Fee Required Section Campaign Financing Section C	
24	Zip	- Nome	28		30	nlry				
-	EII	JINGS INC.	and Address of	Current negisti	area Agent		81	Name		
3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311						82 83	Street Ad	Street Address (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at office or registered agent, or both, in the State of Florida, Such change was authorized agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida State.						64 Dove	/	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered		
1	GNATURE		for printed name of regi-						uired when reinstating) DATE	
12	2		OFFICE	HS AND DIRECT	TORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
STI	ILE UME REET ADDRESS IY-ST-ZIP	CRAIG, JAMES H 1325-18TH AVENUE S.W.		☐ DELETE	1 2 NA	ME Reet	ADDRESS	Change Addition		
STI	ME Reet address	ne [□ DELETE	2.1 TII 2.2 NA 2.3 ST 2.4 CI	ime Reet	ADDRESS	☐ Change ☐ Addition		
NA ST	TITLE NAME STREET ADDRESS CITY-ST-ZIP			[_,] DELETE		3 1 TITLE 3 2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		Change Addition		
NA:	LE Me Reet address				DELETE	4.1 T() 4. 2 N/ 4.3 ST(ILE AME REE (ADDRESS	☐ Change ☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS				DELETE	44 0/1Y- LETE 51 TITLE 5.2 NAME 5.3 STREE			Change Addition		

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental arrival report is true and accidate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an artichment with an address.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

01011471407

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

racinitent way aryadopsis.

DELETE

4/30/98 561-569-6337

☐ Change

Addition

FILED

May 14 1998 8:00am

Secretary of State

2E034 (10/97)